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ABSTRACT

The preface to this document explains action by the Iowa legislature mandating that all schools in the state teach human growth and development to students in kindergarten through grade 12 and notes that educa ion concerning Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (HIV/AIDS) is one of the components which are mandated. The materials presented in this publication are intended for use in HIV/AIDS education. A notebook format was chosen so additions and deletions could be made as research brings forth new information. Included in the materials are a manual for initial assistance to schools and communities; the AIDS/HIV Portion of the Human Growth and Development Curriculum Guide with activities for grades kindergarten-3, 4-6, 7-9, and 10-12; the early elementary model curriculum "Meet the Somebodies," designed for use in prekindergarten, kindergarten, and first grade; a bibliography of approved materials to be used in AIDS/HIV education; and appended materials including the relevant legislation. (NB)

from the original document.



AIDS/HIV Education

Bureau of Instruction and Curriculum Iowa Department of Education

Introduction

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TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC) "

Iowa, a place to grow



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PREFACE

Iowa's legislature passed Senate File 2094 during the 1988 legislative session. That new law mandates that all schools in Iowa teach Human-Growth and Development to students in kindergarten through grade twelve. HIV/AIDS education is specifically mentioned as one of the components which are mandated.

A cooperative agreement with the Centers for Disease Control encourages the Department of Education in Iowa to implement a program through which all Iowa school children will be educated so they understand what the disease is, how it is transmitted, and how it is avoided. Comprehensive education for HIV/AIDS will begin during this school year, and continue through following years in a cummulative manner, so that young people can use their knowledge as a basis for deciding upon future behaviors and life styles. Schools will be surveyed annually to determine the status of their educational involvement, while randomly selected districts will be asked to allow student surveys to take place, so that a data base of knowledge, attitudes and behavior can be established, and changes monitored. Our educational plan will be based on the needs that the collected data indicates is present among our students. It is our goal that every student who passes through the educational program in !owa will then have the opportunity to benefit from the only vaccine now available to prevent HIV infection--namely education.

Iowa's state motto is, "Iowa, a Place to Grow." That theme becomes a challenge to school personnel at this time of a nation wide HIV/AIDS epidemic when no cure seems to be in the immediate future. The children of Iowa have a right to grow into productive adults who will contribute to the advancement of society in a world wide perspective. Iowan's are proud of many people who have done just that including the inventor of the computer, and a president of our United States. It we are to help our young people become productive citizens, we need to provide them with factual information about being male and female, decision making skills, tools with which to communicate, and concern for humankind. Those concepts are components of our HIV/AIDS preventative educational plan. We feel that a positive aspect of the epidemic is that schools can now address these themes in ways we have not felt free to do so in the past. Because of the HIV/AIDS epidemic and its' urgency to educate, our children will have the opportunity to grow in those ways in a more organized fashion than may have been without this imperative.

The contents of this notebook were designed to put education for HIV/AIDS into a positive perspective. The notebook format was chosen so additions and deletions may be made as research brings forth new information, and HIV/AIDS related educational materials can be kept organized with ease.

With a positive approach toward HIV/AIDS education, combined with ocoperative efforts from the Centers for Disease Control, the Iowa Department of Education, the area education agencies and the local school districts, the children in Iowa will be less threatened by this deadly epidemic, and can enjoy a greater opportunity to grow.

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This manual was produced in-house at the Iowa Department of Education and reviewed by the following members of the Advisory Committee:

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This publication was completed with support provided by cooperative agreement (number U63/CCU703067-01) with the Division of Adolescent and School Health, Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control, Atlanta GA 30333.



SUGGESTED GUIDELINES FOR CURRICULUM CHOICES

I. GENERAL INFORMATION

- --- speaks to CDC's recommended concepts
- ---accurate
- ---free from sexual bias
- ---current
- ---culturally sensitive
- ---addresses ways of transmission/non transmission
- ---recommended for specific age groups

2. LANGUAGE

- ---inclusive
- ---respectful
- ---clear/precise
- ---contains vocabulary list with definitions
- --- appropriate for specific age group

3. USABILITY

- ---provides introductory activities
- ---identifies learner outcomes
- --- suggests evaluation techniques
- ---available for loan
- ---permission to reproduce activities
- ---contains suggestions for infusion/integration into other curricular areas

4. APPEAL

- ---attractive format
- ---addresses concepts with creativity
- ---economical cost





AIDS/HIV Education

Bureau of Instruction and Curriculum Iowa Department of Education

AIDS/HIV Resource Manual

Iowa, a place to grow





AIDS/HIV Education

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IASC Manual Becoming an AIDS/HIV Pro

Iowa, a place to grow



I-ASC MANUAL

Initial Assistance to Schools and Communities

HIV/AIDS Education
Bureau of Instruction and Curriculum
Iowa Department of Education

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INTRODUCTION

Some 5 100¹ districts do not have a procedure for first response to HIV positive students and/or staff and their families. This manual has suggestions for a <u>procetive</u> approach so that policies and education plans can be in place before an HIV positive person is identified in most districts.

This manual is intended to present a positive approach to dealing with the AIDS/HIV crisis, to inform school administrators in a simple and direct format, to provide a check list for procedures dealing with a student or employee with AIDS/HIV, and to provide a tool for uniformity among school districts while responding to the AIDS/HIV crisis.

A team from the Iowa Department of Education and the Iowa Department of Health will be available to districts if and when identification of an HIV positive person occurs. Contact people are:

Elain Edge, Department of Education, (515) 281-8170,
Pat Young, Department of Health, (515) 242-5838.

I-ASC MANUAL

This manual has been written and distributed to assist schools and communities with an understanding of the AIDS epidemic and their personal preparation for dealing with its existence as well as their contribution to halting its spread.

Through the use of this manual, schools are invited to become an AIDS Pro, specifically:

Pro people Pro tector Pro vider Pro active

Pro moter
Pro fessional
Pro ductive

Pro people

More than 84,000 people in the United States have been diagnosed as having AIDS. It is no longer THEM vs. US. The disease has now touched the lives of someone that most of us know. Each of the persons with AIDS/HIV is a real person, with basic needs and feelings, with a family and friends, with dreams and a desire to live. Schools and communities which are Pro People can:

- refer to <u>Persons With AIDS</u> as just that, or better yet, <u>Persons Living with AIDS</u>. No child or employee would be called a victim in a Pro People school district.
- diminish the anxiety of people with AIDS/HIV by treating them with integrity, honoring confidentiality, and allowing them to continue their education or enployment as long as they are able. The person is not infectious, only some of his/her bodily fluids. Precautions need to be taken while dealing with those fluids, not while dealing with the person.
- remember that we are fighting a deadly disease, not each other.



Pro tector

And the Control of the Control

Education is the only known preventative or treatment at this writing. Most of the persons with AIDS/HIV became infected before they knew how to prevent the disease. Schools and communities can assume the role of protectors if they:

- let all ages of people become aware of the ways AIDS/HIV can be prevented.
- acknowledge that less than .2 percent of all the U.S. AIDS/HIV cases have been reported in Iowa, and make the decision that we will not increase that percentage.
- implement protective measures which insure killing the virus should it appear outside the body in blood, semen, or vaginal fluids by using one part bleach and ten parts water on all bodily spills. This solution is effective against all communicable diseases.
- allow people living with AIDS/HIV to continue their role in the school or community as long as their health permits. The risk of transmitting AIDS/HIV 'hrough casual contact from work, school or home is virtually nonexistent. (1)
- insure confidentiality concerning a person within the school family who is HIV positive.

Pro vider

According to the latest Gallup Poll, 30 percent of those interviewed believe AIDS preventative education should be taught in the schools. Only five percent feel it should not, while five percent stated they did not know. "The success of any school-based curriculum on AIDS must include a broadly representative committee that has access to appropriate medical consultants, and the capability to prepare and implement educational programs appropriate for school staff and the public." (2) Iowa's SF 2094 requires a resource committee composed of representatives of parents, teachers, administrators, students, health care professionals, and members of the community to work together planning a local Human Growth and Development program, of which AIDS is one of the issues to be addressed. (3) By combining efforts, schools and communities can be effective providers of AIDS/HIV education by:

- providing factual and updated information about AIDS/HIV and the ways it can be prevented. Because that information changes as more research takes place, education needs to be on going. At best, it will be offered at least annually and will be age appropriate and specific.
- providing an educational design and the required time which will allow the learner to integrate this information with what they already know. "In this segment, the student engages in activities where there are opportunities for discussion, for clarification, and for making comparisons." (4)

- providing opportunities for learners to practice the skills of decision making as they participate in activities where they can draw conclusions.
- including annual staff inservice as part of the educational plan, so they, too, may be updated and identify resources that are then available.

Pro active

"In districts where controversy erupted, lack of communication among public officials and between public officials and the public contributed to public anxiety." (5) In Iowa, we have the advantage of using the expertise of those from other areas who have experienced AIDS/HIV in the school setting with greater numbers identified than we know. The Pennsylvania Department of Education and the U.S. Department of Justice have suggested a checklist which has been revised and follows in the appendix. Schools and communities can become Proactive versus reactive by:

- educating board members, administrators and parent groups about AIDS/HIV.
- implementing a legally sound policy consistent with the recommendations issued by the Centers for Disease Control and the Iowa Administrative Code.
- developing an action plan by which schools and communities can work together to become enabled to successfully manage controversy.
- o planning ahead for procedures for working with the press.

Pro moter

In lowa, the new standards require local boards to adopt policies for implementation of a school health services program. Included in that standard is a plan for communicable disease prevention and control. Therefore, in our state, AIDS/HIV prevention fits into the comprehensive plan or health education, so it seems fitting to Promote:

- * basic good health habits and body ownership.
- the use of an advisory committee with a broad-based community, school, and health professional membership.
- education which speaks to the reduction of high risk behavior. "The heaviest burden of illness in the technically advanced countries today is related to individual behavior, especially the long-term patterns of behavior often referred as life style'." (6)



Pro fessional

"The news media, through public education, can play an important role in the effort to curtail the spread of AIDS/HIV panic." (7) Schools and communities which are Professional will:

• encourage the media to catch the positive attitude by supplying them with information about policy, committee work, and educational efforts in a professional manner.

have a plan for press releases and/or interviews which stress professional responses that protect confidentiality and offer respect if and when a person with AIDS/HIV is identified in a school district.

Pro ductive

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AIDS/HIV preventative education will only be successful if behavior changes. Schools and communities will be Productive in changing behavior if they:

- network with agencies providing AIDS/HIV education and guidance.
- cooperate when asked to participate in surveying, training, and teaching experiences.
- recognize that behavior change is the ultimate goal. "More boys (18 percent) than girls (14 percent) believe it is acceptable for people their age to have sex with several people." (8) However, "One in six sexually active high school girls has had at least four different sexual partners." (9)

Statewide cooperative effort is necessary if Iowa is to remain near the bottom of the list of states ranking incidence of AIDS/HIV. A positive attitude toward education is necessary and possible if that is to be accomplished.



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APPENDIX

SUPERINTENDENT'S CHECKLIST FOR THE ADMISSION OF STUDENTS/EMPLOYEES WITH AIDS OR HIV INFECTION

I. ESTABLISH A TASK FORCE TO HELP YOU MANAGE COMMUNITY REACTION. (SF2094)

II. DEVELOP AN ACTION PLAN READY FOR IMPLEMENTATION IF THERE IS PUBLIC DISCLOSURE AND POTENTIALLY ADVERSE COMMUNITY REACTION

An action plan should be readied in advance to guide appropriate decision-making and planning. Its implementation, if required, should include the following activities;

- -Establish a task force to help you manage community reaction.
- -Preserve Maximum conficentiality of the student's identity and location
- -Provide all school staff with information about AIDS/HIV, the district's AIDS/HIV policy, and instructions on hygenic precautions.
- —Disseminate information and schedule public meetings as necessary and appropriate to convey accurate medical information and to explain the district's AIDS policies and hygienic precautions taken.
- -Provide AIDS/HIV information apprepriate to each student as group, as well as to district employees.
- -Establish and convey necessary media groundrules.

III. WHEN ADVISED THAT A STUDENT/EMPLOYEE HAS AID3 OR AN HIV INFECTION

- -Review district AIDS/HIV policy or communicable disease policy.
- —Consult the State Department of Education and the State Department of Health and the Centers for Disease Control regarding advice.
- -Consult promptly with AIDS/HIV experienced medical authorities.
- -Confer with experienced superintendents of schools.
- -Contact the district's attorney for legal advice.
- -Maintain close communication with the parents or guardians if the identified is a child with AIDS.

IV. AFTER YOU HAVE HANDLED AN AIDS SITUATION

-Review your decisions, procedures, policies, and plans thoroughly to improve future decision-making and planning processes.

Chace, Jonathan. (1988) Advice to school superintendent: planning for the admission of students with AIDS and managing potentially adverse community reaction. U.S. Department of Justice, Philadelphia, Pennslvania



AIDS/HIV Education

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ASC Quarterly Newsletters

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AIDS/HIV Education

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AIDS/HIV Portion of the Human Growth and Development Curriculum

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AIDS/HIV PREVENTATIVE EDUCATION

The AIDS/HIV Portion of the Human Growth and Development Curriculum Guide

Bureau of Instruction and Curriculum Iowa Department of Education

State of Iowa DEPARTMENT OF EDUCATION Grimes State Office Building Des Moines, Iowa 50319-0146

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AIDS PREVENTATIVE EDUCATION

"I think one good thing to come out of this terrible predicament we have with AIDS is that we are able to teach children about their own sexuality in a non-mystifying way." (Surgeon General Koop)

THE CHALLANGE

The Surgeon General's fultement summarizes what many concerned educators are feeling. However, the challenge is to present AIDS education in a way that is free of panic and fear to protect those who are already infected. At the same time, we must teach in a way so our students internalize the seriousness of the epidemic, so that they realize THEY are AT RISK if they enter into certain behaviors. This necessitates teaching not only factual information, but also decision making skills and the ability to communicate effectively.

A CURRICULUM WITHIN A CURRICULUM

In an effort to accomplish those tasks, the Iowa Department of Education has chosen to incorporate AIDS education into this comprehensive Human Growth and Development Curriculum, which in turn will become a part of our Health Education program. Health Education is specifically addressed by the new standards which school districts must meet by July 1, 1989. With this format, we are hopeful we can accept the above challenge and offer AIDS education in ways that will eventually HALT the spread of the deadly disease in our state. Much of the portion of this curriculum which deals with AIDS is found in the Sexuality Strand, however,, some of the education within the Prevention and Intervention Strand is also applicable. The objectives, Learner outcomes, and activities which speak to AIDS preventative education have been separated into this portion of our AIDS educational manual, so that it will be more readily available to schools who want to focus specifically on AIDS education. Other portions of the Human Growth and Development Curriculum guide, such as those concerned with self esteem, are also related AIDS preventative education. These have not been separated into this document.

It is intended that the learner outcomes will in time become cummulative, building one upon the other. Therefore, what is learned in grades 7-9 serves as a foundation for what is learned and absorbed in grade 10, etc. Since AIDS education may not have been a part of the school curriculum previously, it may be realistic for some districts to use sections at a lower grade level and work up to avoid gaps in factual materials, and the readiness to integrate them into personal student life styles.

BIBLIOGRAPHY

A separate bibliography which lists AIDS resource materials, designating which are available locally, is included in the section of the manual which is reserved for bibliographical purposes.



AIDS RESOURCE MANUAL

Pertinent information about AIDS has been published in the AIDS Resource Manual for Education (Department of Health and Department fo Education, 1987). It is recommended teachers refer to that for factual information. An updated manual will be published in 1989. The revised document will become available to local districts as it becomes available, it is recommended that the revised document replace the present resource manual.

GROWTE OF THE CURRICULUM GUIDE

To fit with the expanding format of the AIDS Education Manual, teachers are encouraged to share additional activities that have worked well to produce learner outcomes identified in this portion of the manual. Those activities will periodically be printed and mailed to other districts, so that our AIDS preventative education can become more effective.



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Grade Level K-3

Objective: To identify AIDS/HIV a disease which makes some people very sick, but is not casually transmitted.

Biological Physis	Paycho-Social Focus	Vecabulary
Students will	Students will	
discriminate between communicable and noncommunicable disease including Acquired Immunodeficiency Syndrome (AIDS).	develop a feeling of comfort while talking about serious diseases including AIDS/HIV.	germs disease chicken pox flu immunization colds

identify germs as the cause of communicable disease.

identify ways to keep free of germs as much as possible.

communicable non-communicable vaccination immunization community



Thinking skills, multicultural education, communication skills

Social Studies Health Science Math Language Arts

Illustrate the exchange of some germs by putting a dot of lipstick on the palm of a hand, transferring it from teacher to student - to another student, etc. Explain some diseases are spread by germs that live outside the body - then enter and live in the body. Give examples (chicken pox, impetigo).

Illustrate the spread of some germs that travel through the air b' putting colored water in a spray bottle and spraying. Give examples of illnesses caught by germs in the air, (colds, flu, etc.)

Brainstorm and list wa, s people keep from getting sick.

Demonstrate and allow children to practice proper handwashing techniques-as well as proper ways to use a handkerchief.

Proctor and Gamble Handwashing Kit, 2150 Sunnybrook Dr., Cincinnati, Ohio, 45237.

Grade Level K-3

Objective: To demonstrate a caring attitude toward people with AIDS/HIV.

Objective: To employ decision making skills to make responsible choices relative to alcohol and

drug use, as well as non-use.

Psycho-Social Focus Vocabulary Students will . . . Students will ... label diseases as communicable or

non-communicable.

describe AIDS/HIV as a disease that causes some people to become very sick, but is very hard to get.

ask questions about AIDS/HIV freely without fear.

disease host virus, HIV.



Grade Level	K -3
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Objective:(continued)

Biological Focus	Psycho-Social Focus	Vocabulary
will identify safe behaviors in situations which involve medicine and poisons.		medicine, safe poison, unsafe.

recognize scientists all over the world are working to keep people from getting AIDS/HIV and cure those who have it.

identify health care workers as friends who want to keep children healthy.

scientists laboratories

will label activities in life as healthy versus non healthy.



listacion	Integration	Activities	Resources
non-sexist, thinking skills. decision mrking, communica- tion skills	Health Science Social Studies	Have a nurse or doctor visit class to discuss why people take medication, the importance of a doctor's advice when taking medicine, the difference between medicine and poison, how drugs can help or hurt the body, and how immunization keeps people from getting sick. A syringe used for immunization could be demonstrated, as it is emphasized that each needle is used only once with reasons given for that.	
	Display collage of scien- tists working in laboratories, labeled "Peo- ple are working hard to find a cure for AIDS/HIV."		
	Use various activities from the early elementary curriculum "Terry and the Dragon."	Terry and the Dragon, 1988, Creative Graph- ics.	
		Use poster kit "When Somebody Has AIDS," following with several of the activities.	Meet the Somebodies, 1989, Iowa Dept. of Education.

The state of the s

Grade Level 4-6

Objective: To become aware that AIDS/HIV is a disease that can be avoided by making choices about our behavior.

Biological Fecus	Payche-Social Focus	Vocabulary
Students will	Students will	
identify causes of com- municable dieases as virus or bacteria being able to distinguish the HIV as the causative agent for AIDS.		bacteria virus communicable causative
identify sexual intercourse with an infected person as a behavior placing that person at high risk for contracting AIDS/HIV.	recognize that casual daily encounters with an infected person does not put one at risk for contracting AIDS/FIIV.	infected intercourse risk encounter

contrast knowledge with commonly held myths

give examples of how the use of drugs and early sexual intercourse is related to lack of self-esteem. self-esteem
peer pressure
myths
accurate
information
contrast



Informa	Integration	Activities	Resources
global education, thinking skills, communication skills, decision making, multicultural	Language Arts Science Health Social Studies	Students draw names of diseases from hat and are assigned a research project of 1-2 pages that includes causes, symptoms, how transmitted, prevented and treated, as well as areas of the world where that disease became a problem.	Into Adolescence Learning About AIDS, 1988, Network Publication.
special education		Chart students' findings in grid form as a basis for class discussion.	
	Creative Dramatics	Copy a story about a child with AIDS/HIV on different colored flash cards - assigning one color to a child and have the story read in "script form." Discuss the information about causes which have been built into the story.	Into Adolescence Learning About AIDS, 1988, Network Publication
guidance, special education multicultura!	Language Arts	Create a "myth bank" where pupils deposit myths about AIDS/HIV, which have been gathered from peers, parents, etc. Myth must be brought to class, discussed and factual information to dispel it before it is placed in the myth bank.	

Grade Level _	4-6
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Objective: (continued)

Biological Pocus

Psycho-Social Focus

Vocabulary

identify the AIDS/HIV risk related to sharing IV drug needles.

identify the temporary effects of gateway drugs (marijuana and alcohoi) have on the immune system. identify the effect of gateway drugs on responsible decision making. gateway drugs marijuana alcohol

Infusion	Integration	Activities	Resources
		Compose several "what if" situations where students will need to brainstorm possible behaviors, consequences, etc., examples: friend tries to convince child to smoke pot - or to kiss girls at a party - or to have sex after a movie - making the situation age appropriate. Stress which situations need adult guidance.	
guidance, nonsexist education, decision- making skills, communication, special education	Social Studies Language Arts Drama	Show VCR tape such as Ryan White's Story, "I Have AIDS" as he candidly discusses his situation with early adolescents.	"I <u>Have AIDS</u> ", a <u>teenager's story</u> , The Children's Televison Workshop.
		As a class project, have students create a highly enlarged "picture" of blood - using a blue tag board covered with red gummed dots - and a few white dots - explain the ratio and duties of the red and white blood cells, introduce the HIV virus, illustrating how it attacks the white T cells and duplicates - antibodies appearing later.	AIDS Resource Manual for Educators, 1987, Iowa Dept. of Education and Iowa Dept. of Health. "What is AIDS?", MTI Film and Video, (Simon and Schuster).

AIDS	Edu	cetic	
פעות	Euu	ICHUU	"

Grade Level	4-6	

Objective: (continued)

Biological Focus	Psycho-Social Focus	Vocabulary
		exposed
		immune
		contract
		defense



Infusion Integration Activities Resources

Draw silhouettes of young people. Identify ways the HIV can enter the body (any wet portal) with arrows - explaining that not all exposed contract the disease; those with intact immune (defense) systems are at less risk.

Grade Level ___4-6

Objective: To acknowledge the difference between HIV positive and AIDS, clarifying that carrier of both can transfer the disease to others.

Baseries Forus	Payche-Social Focus	Vocabulary
Students will	Students will	
match acronyms HIV, ARC, AIDS, PWA with correct terms.		acronym symptomatic non-symptomatic acquired immunodeficiency syndrome
compare and contrast the concept of HIV positive and symptomatic AIDS.	recognize family and friends as important support systems during times of crisis, including when AIDS/HIV has been diagnosed in self or family member.	infectious

8.22 8.22	***************************************	***************************************	***************************************
Infusion	Integration	Activities	Resources
nonsexist education, thinking skills, communication skills, special education	Language Arts Health Science	Begin a study of acronyms by brainstorming the most commonly known ones to student, such as TV, VCR, MASH, etc. Explain why & how acronyms are used-lead discussion to AIDS, HIV positive, PWA, ARC, VD, STD, SSI, etc giving explanation of each term.	Surgeon General's Report on AIDS.
		Activities from Channing L. Bete, "Let's Talk About AIDS" book.	Let's Talk About AIDS, information and activity book - 1988, Channing L. Bete.
	Reading	Read aloud a story about a person with AIDS and the emotional dynamics that take place - Ex. Friend for Life - Use as springboard for discussion.	Friends For Life, 1988, Kid on the Block Series, Twenty-First Century Books.
guidance, multicultural	Social Studies	Invite a person with AIDS/HIV to class as a resource speaker to discuss the need for support of family and friends. Explain that a person who tests HIV positive can feel healthy for a long time but still be infectious.	Does AIDS Hurt? Educating Young Children About AIDS, Network Publishers.

Grade Level __4-6

Objective: (continued)

Rolegical Prictis	Psycho-Social Focus	Vocab lary
	identify feelings which would become part of a person's psychological being upon being identified as HIV positive.	emotions psychological identified
	identify current social reactions to an HIV infected person.	reactions

Infusion	Integration	Activities	Resources
guidance, multi- cultural, special education	Language Arts Health Science Social Studies	Scramble words that depict feelings of people who find out they are HIV positive. Have students unscramble sheet which is titled "Mixed Up Feelings About Getting AIDS", ex. fodscne = confused.	

Grade Level ____7-9

Objective: To identify routes of HIV transmission.

Biological Forus	Psycho-Social Focus	Vocabulary
Students will	Students will	
match scientific terminology of AIDS/HIV with proper definition or acronyms.	identify individuals who are HIV positive as infections and carriers of HIV.	immune immunodeficiency acquired syndrome virus antibody carrier sexual intercourse anal intercourse vaginal intercourse oral intercourse

Indianica	Integration	Activities	Resources
nonsexist, talented and gifted, thinking skills,	Language Arts Science Health Physical Education	Assign small groups of students the task of designing "football plays" that illustrate the Human Immunodeficiency Virus	And The Band Played On, St. Martins, Press, New York.
decision making, self-esteem	Math	as an attacking team - contrasting opposing teams with weak defenses (inmune systems) with those who are well armed with strong defenses of	"What <u>is AIDS?</u> ", MTI Film and Video Co., (Simon and Schuster)
		(a) not coming in contact with bodily fluids, (b) not shooting up drugs, (c) not using manjuana or other gateway drugs, etc.	Into Adolescence Learning About AIDS, Network Publishers.
		Use illustrations with lecture as shown in Into Adolescence to promote understanding of how the virus infects the immune system.	
		Make concentration game from index cards with terms or abbreviations on one card and definition on matching card. Have students play game in small groups.	Know About AIDS, Network Publishers.

Grade Level	7-9		
Objective: (con	itinued)		

Biological Focus Psycho-Social Focus Vocabulary

separate myths from factual information about the transmission of AIDS/HIV.

ask questions about AIDS/ HIV with ease and comfort.



		Have students work in dyads, designing true and false tests for another group of two. Answer sheets with factual information could be part of the assignment.	
		Pass out individual pieces of candy to students from basket or dish - have only one of a specified kind (ex. Bit of Honey). Instruct students to shake hands with four or five other students. Then ask person with Bit of Honey to stand - then everyone who shook hands with him or her - then everyone who shook with those people - use to illustrate the probability of HIV being transmitted from someone who is still well, but infected - emphasizing IF they had engaged in intercourse or IV drug usage instead of shaking hands.	
communication skills	Family Living Guidance	Invite a panel of people, (medical person, funeral directors, AIDS coalition, Red Cross, person with AIDS/HIV, etc. to answer questions students have written anonymously on cards before and/or during the panel.	Central Iowa AIDS, Project, 515-243-7681. Rapids AIDS Project 319-393-3500. Quad Cities AIDS Coali- tion, 319-326-8618. AIDS Coalition of N.E. Iowa, 319-234-6831.
		43	AIDS Coalition of Story County, 515-232-6590. Siouxland AIDS Coali- tion, 712-252-4081.

Activities

Resources

Integration

Grade Level ___7-9

Objective: To identify names, symptoms, prevention and transmission of the most common STDS including HIV.

Biological Focus	Paycho-Social Focus	Vocabulary
Students will	Students will	
compare the symptoms of sexually transmitted, shared infections.	recognize how sexually transmitted/shared infections are spread from geographical area to area.	epidemic global symptoms asymptomatic incubation period

acknowledge the effects of an epidemic on communities and cultures.

culture



influcion	Integration	Activities	Resources
global education, communication, multi- cultural	Social Studies Science Hea'th Biology	Brainstorm names of all sexually shared infections students have heard of, then make a class chart that illustrates symptoms, populations most infected, incubation period, treatments, etc. Chart information as students bring it incuse as a basis for discussion. Loo' for common characteristics - Bring into discussion methods of transmission.	Centers for Disease Control, Atlanta, Ga., 404-639-3472. State Health Dept., Division of Disease Prevention, 515-281-4936, V.D. Clinics. AIDS Hotline 1-800-445-AIDS. STD Manual, Iowa Department of Health.
communication skills, globel education mulvi- cultural	Social Studies Language Development Library skills	Compile list of epidemics from which students choose to research by library research, personal interviews, phone calls, etc. to find information as to: 1. Where epidemic took place. 2. Time span of epidemic. 3. How widespread. 4. Effects on population.	Encyclopedias, history books, etc.

Grade Level _ _7-9_

Objective: To acknowledge the importance of decision making for reducing the risk of becoming infected with the Human Immunodeficiency Virus.

Biological Focus	Paycho-Social Focus	Vocabulary
Students will	Students will	
	recognize the steps of a decision-making process.	decision control peers pressure

practice refusal skills with regard to sexual or drug behavior. refusal skills self control values self esteem



communication skills. decision making, nonsexist

Drama Social Studies Family Living

Make large flash cards to identify steps of decision making as: Defining the problem, naming and examining the choices, looking at alternatives, acting, assuming the responsibility. Guide class through the steps with simple decisions (age appropriate) such as -Should I go to the dance alone or with a date?

Have a set of situations (what if cards) to practice decision-making skills. For example, what if: a girl wants to entertain her boy riend in the bedroom, someone invites a person to share an IV drug, a person expects sex at the end of a date.

communication, Drama nonsexist. decision skills

Guidance Family Living Divide groups in to parts. Assign person #1 a talk to try to convince his/her friend to participate in an activity which could be dangerous but fun - ex. skipping school to shop, climbing the pool fence and going for a midnight swim, etc. Person #2 must find ways to say no, then exchange roles. Gather group together to discuss feelings and techniques to say no.



Grade Level 7-9

Objective: (continued)

Biological Focus

Psycho-Social Focus

Vocabulary

compare consequences of choice in reference to behaviors that lead to HIV infection.

responsible irresponsible consequences

identify the risk to infants being born HIV to HIV positive mothers

prenatal

Instruct each student to write on a card three things they can't do (ex.) I can't fly a plane. Shuffle cards and have them read aloud by different students. Then instruct them to cross out the word can't and replace it with won't. Discuss how tone of voice changes, and that won't indicates a decision has been made, and that the person is in control of self and future actions, taking responsibility rather than excusing self with the excuse "I can't."

While making a large chart, brainstorm to form lists of behavior under the headings:
I Won't Get AIDS If:
I Might Get AIDS If:
I Most Likely Will Get AIDS If:
Then make large red arrow that grows from a

row that grows from a thin line to a very thick arrow. With the arrow's help, illustrate how people have the choice which direction to move the arrow - from irresponsible to responsible behavior or vice versa.

AIDS Facts, Classroom Connections, Inc.

Presidential Commission on the Human Immunodeficiency Virus Epidemic.

multicultural, non-sexist Language Arts

Assign creative writing project that is entitled "I'm ready to be born - and my mama has AIDS". Ask students to speak to % of risk child will be HIV positive, how mother contracted disease, what will happen when mother is no longer able to care for child, etc.

What Women Should Know About AIDS, Network Publication.



AIDS	Education

Grade Level 7-9

Objective:(continued)

Biological Pocus

Psycho-Social Focus

V cabulary

acknowledge a behavioral choice can be made that will allow them to stay free of AIDS/HIV (abstinence).



Infusion Integration Activities Resources

Art Have an art contest that will result in designing a logo which illustrates "I've decided NOT TO GET AIDS." Use that logo for

that decision.

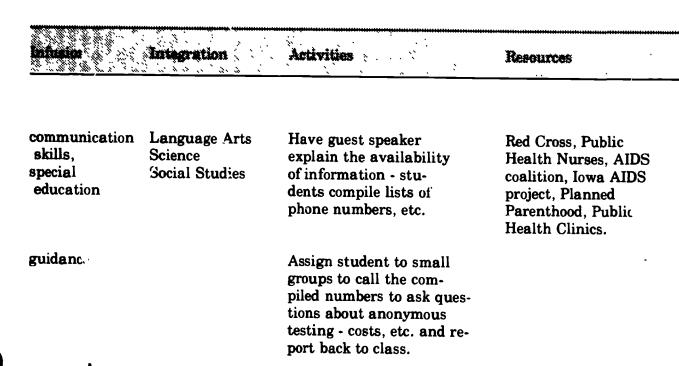
posters, buttons, etc. - encouraging students to sign a pledge before displaying

Grade	Level	7-9

Objective: To recognize resources if the student wants additional information or testing for sexually shared/transmitted diseases, including AIDS/HIV.

Biological Focus	Payche-Social Focus	Vocabulary
Students will	Students will	
	have access to phone lines where anonymous questions may be answer. 1.	anonym ous

become acquainted with local treatment/testing sites.



Grade Level ____10-12

Objective: To identify the biology, mechanisms of transmission, risks, consequences and preventative methods of AIDS/HIV.

Biological Focus	Psycho-Social Focus	Vocabulary
Students will	Students will	
summarize the methods of transmission of the Human Immunodeficiency Virus.	identify AIDS/HIV as a behaviorally caused condition.	immunodeficiency acquired syndrome virus anal intercourse vaginal intercourse oral intercourse infection

diagram a comparison of the Human Immunodeficiency Virus to a virus that the immune _ystem can resist.



batasian	Integration	Activities	Resources
communication skills, special education	Health Social Studies Biology	Duplicate a worksheet type handout with questions about the transmission of AIDS/HIV. Then show a videotape which explains the methods of transmission and dispells the myths surrounding transmission. Students fill in the worksheet as they watch the video.	Beyond the Fear of AIDS. Don't Forget Sherrie, Letter from Brian, American Red Cross, Understanding AIDS, What Teens Need to, Know, Sunburst.
		Do a study of immuno- logy using prepared unit from National Maternal and Child Clearinghouse.	Immunology and Human Health, BSCS Teacher Unit, National Material and Child Health Clear- inghouse.
		Utilize what is learned as it relates to AIDS/ HIV - instruct students to list implications for persons concerned with halting the spread of AIDS/HIV.	
	Art	Assign small groups of students to reproduce of cycle charts iflustrating infection caused by each virus, with original diagrams on ways to break that chain.	Breaking the Chain Infection, American Assoc. of School Admin- istrators.
		Ask a person with a positive diagnosis to speak about his/her behavior that led to the present condition.	HIV/AIDS coalition.

Grade Level 10-12

Objective:(continued)

Biological Forus

Psycho-Social Focus

Vocabulary

epidemiology

recognize that biological sexual drive is natural in adolescents.

discuss risk based on decisions vs. risks based on impulse.

impulsive decisive premeditated

identify ways adolescents can practice abstinence and cope with the normal sexual drive in ways that do not put them at risk for contracting AIDS/HIV.

become part of a community planning committee to prevent the future spread of AIDS/HIV.

infusion .	Integration	Activities	Resources
	Biology English Composition	Assign short research projects on epidemiology of various diseases (one to two pages in length). On the following day, arrange chairs in a circle and each share two facts they learned. Record the facts on large newsprint, then compare other diseases with the epidemiology of AIDS/HIV.	Local Library Resources. AIDS & nd Your World, Scholastic. AIDS and Society, Glencoe Publishers.
thinking & communi- ca lon skills	Health Science Social Studies Library Skills	Guest lecturer on sex- uality, or taped lecture by Dr. Ray Short or Soi Gordon.	Love, Sex or Infat- uation, Ray Short, Augsburg Films.
guidance		Brainstorm "101 ways to make love without get- ting AIDS/HIV, Gonorrhea or pregnant - list on poster-sized paper.	A Test of Love or Sex, A Topic for Con- versation, Sol Gordon Mondale Production.
		Encourage class to vote on a male and a female to represent the senior high school on the community committee to plan AIDS/HIV education.	
		Contact local newspaper and volunteer to supply series of student prepared educational articles about AIDS/HIV. Allow students to choose topics to write with specified guidelines and criteria.	



Grade Level 10-12

Objective:(continued)

Biological Focus

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Psycho-Social Focus

Vocabulary

describe the relationship of drug usage to the dangers of contracting AIDS/HIV.

recognize that abstinence from sexual intercourse and drug usage almost completely eradicates the risk of AIDS/ HIV.

eradication

personalize the psychological trauma connected with the AIDS/ HIV epidemic.

psychological trauma emotion

list the physical diagnosic of HIV infection.

herpes
hepititus
pneumocystc
carinii
kaposis sarcoma
prognosis
asymptomatic
dimentia
intrauterine





HION	Integration	Activities	Resources
	English	Interview people who have been known to take risks - such as those who invest in the stock market, those who live different than "normal life styles," those who ride motorcycles, etc. Stress finding information about if that risk is premeditated or if it is impulsive - contrast those with or without physical dangers and discuss if a relationship is found for decisive - less dangerous, etc. View a VCR tape.	
		Instruct students to list all the emotions observed on index cards. Make crossword puzzles to be worked by other students.	AIDS Prevention Program For You, American Red Cross.
	Writing across the curriculum	Prepare a 'ist of people related characters to a person with AIDS/HIV, ex. sister of a person with AIDS/HIV, best friend, girlfriend, daughter, son, mother of infected infant. Write imaginary diaries for a specified period of time.	The AIDS Challenge Preventative Ed- ucation for Young People, Network Publishers.
	English Math	Assign the reading of life stories of people with AIDS/HIV - tabulating the length of time they remained asymptomatic the money they spent on AZT, etc. Make oral reports in class.	Current Magazines, local news article, The Screaming Room, Peabody Oaktree Publishers.



Grade	Level	10-12

Objective:(continued)

Biological Focus	Psycho-Social Focus	Vocabulary
	recognize the expense of the drug available for relief of AIDS/HIV symptoms.	
summerize the biological knowledge of AIDS/HIV.		summarize

become comfortable discussing AIDS/HIV while sharing information with others.

make a decision about their contract future risk of contracting AIDS/HIV.

infusion » Integration Activities Assign students tasks of of phoning local pharmacies to price AZT. special Art Brainstorm ways older education, Drama students could teach talented & AIDS/HIV education to Language Arts gifted, other students. Ask for guidance volunteers (groups of 2-5 could work well) to create a teaching tool for specified lower grade level such as: puppet play for first graders; posters for junior high; booklet for special education, simulated radio talk show for high school students, or make a tape simulating a dating couple discussing why they've chosen to postpone sexual intercourse. Design a contract which encourages students to think seriously about their future plans to avoid AIDS/HIV - asking them to complete it, and share it with a special friend ex. I believe AIDS/HIV is a serious disease that people can avoid if they choose behaviors which don't endanger them -I promise to: 1. 3.

2.

4.

Resources



AIDS/HIV Education

Bureau of Instruction and Curriculum Iowa Department of Education

Early Elementary Model Curriculum "Meet the Somebodies"

Iowa, a place to grow



Early Education Curriculum for HIV/AIDS Education

MEET THE SOMEBODIES

HIV/AIDS Education
Bureau of Instruction and Curriculum
Iowa Department of Education



State of lowa DEPARTMENT OF EDUCATION Grimes State Office Building Des Moines, Iowa 50319-0146

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DATE:

Spring 1, 1989

TO:

Prekindergarten, Kindergarten & First Grade Teachers

RE:

AIDS/HIV Curriculum - "Meet the Somebodies"

FROM:

Elain Edge

All children deserve to be a "Somebody." Even if that child has AIDS/HIV, or lives in a house where somebody has AIDS/HIV. This sample curriculum is written to respond to the question many school districts are asking, "How do we teach AIDS education to kindergartners?"

Iowa's new standards allow for a prekindergarten program, and require every day dergarten. This curriculum is designed to reach prekindergarten, kindergarten and first graders about AIDS/HIV using the suggested objectives from the Centers for D sease Control. Part of the Iowa Department of Education's Mission is to provide educational leadership and service so that children in our state (K-12) can build a lite of quality. The AIDS/HIV epidemic especially speaks to this challenge

The five posters accompanying this guide, can serve as individual lessons or units. Learner outcomes, activities and resources are suggested for each poster. Teacher creativity and expansion is encouraged.

A summative evaluation form is included. With teacher help, it is hoped many original ideas may be generated and shared. With your permission, those ideas will be compiled and sent out to schools at the beginning of the 1989-90 school year.

Poster One: (Learner Outcomes)

Young students will:

- 1. identify ways in which their body is unique.
- 2. list benefits of Le 1g one of a kind.

(Activities)

- 1. Draw around children on butcher paper. Display to illustrate differences in size, etc.
- 2. Make collage of magazine pictures of children of different color, size, etc.
- 3. Take photos of children and display under heading "I am one of a kind."
- 4. Brainstorm ways people are alike and/or different.
- 5. Make picture stories about what is special about each child.
- 6. Teach song, "Just Me" (included).

(Formative Evaluation)

Teacher keeps log on activity participation: attitudes, knowledge and behavior of students - refers if necessary to counselers, etc.

Poster Two: (Learner Outcomes)

The young students will:

- 1. label four basis feelings as mad, glad, sad or scared.
- 2. name situations that make children sad, mad, glad or scared.
- identify feelings as normal for all somebodies.
- 4. describe acceptable ways of dealing with feelings.



(Activities)

- 1. Make paper plate faces illustrating the four basis feelings as expressions. List times when children feel each of the four.
- 2. Make individual charts for each child that can identify child's feeling daily (use circle face with expression named above.) ex. Today, Adam feels

 because.
- 3. Read story about children expressing feelings appropriately.
- 4. Brainstorm with children ways to express each of the feelings in which other people are respected.
- 5. Invent and tell a story about a child who learns his/her sibling has AIDS/HIV, and help the children identify the feelings of each character. (Formative Evaluation)
 See above suggestion.

Poster Three (Learner Outcomes)

Young students will:

- 1. choose good health habits from a variety of activities.
- 2. list adults who are involved in keering children healthy.
- 3. name ways adults help children stay clean and healthy.
- identify times when children need adult's help in staying healthy.
 (Activities)
- 1. Ask children to bring magazine pictures of children who are busy. Post them, and brainstorm activities that are contributive to good health, and those which do not.



- 2. Have children prepare a simple meal from four basic food groups, explaining why those foods make one feel good. Stress hygenic ways to handle food ex. washing hands, wearing gloves.
- 3. Begin an exercise ritual after nap time, emphasizing increasing bodily strengths, such as stretching, etc.
- 4. Visit a local hospital or clinic and ask a doctor or nucse to speak about health habits.
- 5. Invite the custodian to class and ask him/her to explain why they clean bodily spills with special cleaner why they wear gloves to clean blood and times when children need to ask the adults to help (with bloody spills, etc.).
 (Formative Evaluation)
 See above.

Poster Four: (Learner Outcomes)

Young students will:

- 1. sort illnesses and disabilities that are contagious from those which are not.
- 2. list safe ways to interact with a person with AIDS.
- identify health workers who are attempting to make the world a better place.
 (Activities)
- 1. Illustrate children who have colds, flu, etc. contrast those illustrations with those who have broken legs, arms, or asthma or AIDS/HIV (ideas for illustration: puppets, pictures, role playing help from H.S. drama or art clubs).



- 2. Read stories such as AIDS, <u>A Primer for Children</u> by Januce Koch, (Berrent Publications, Inc. 1025 Northern Blvd., Roslyn, N.Y. 11576) and discuss.
- 3. Make a list of safe behaviors while interacting with a person with AIDS/HIV.
- 4. Visit a lab at a hospital and ask technician to explain blood tests and what is being done to help discover things about disease.

(Formative Evaluation)

See above.

Poster Five: (Learner Outcomes)

Young students will:

- 1. choose ways children can control their bodily actions.
- 2. explain times when children must accept rather than change a situation.
- 3. identify special friends who are trustworthy and available for help.
- '. label death as a normal part of the life cycle.

 (Activities)
- 1. Read books such as <u>It's My Body</u>, by Lori Freeman, Parenting Press, Inc. (available from Network Publication, ETR Associate, P.O. Box 1830, Santa Cruz, CA 95061-1830) and discuss.
- 2. Invite a guest who has a disability to explain acceptance and how he/she is unique, emphasizing the positive. Include others acceptance as a necessary ingredient for feeling good. Ask them to explain who is helpful to them.

- 3. Read or tell a story about death, after studying a simplified life cycle process. Emphasize how others can help when someone feels sad about something they cannot control.
- 4. Make a chart listing those who are helpful adults in each child's life and ways the child knows they can depend on that perso ..

BACKGROUND FOR TEACHERS: Teachers of young children do not need extensive medical knowledge to teach effectively about AIDS/HIV. This simple fact sheet may be sufficient, however, further study by teachers is encouraged, and questions are readily answered by the AIDS hotline 1-800-445-AIDS.

AIDS is caused by a virus called HIV (Human Immunodeficiency Virus). The HIV virus damages the immune system so it can't fight off certain infections.

To this date, there is no cure for AIDS. In most cases, t! people who are infected become ill and die.

People often have the HIV virus in their body for long periods of time before becoming ill or even aware that they are infected.



People who are infected with the HIV virus can pass it on to another person through blood, semen or vaginal fluid even though they may appear perfectly healthy.

The most common way people get AIDS/HIV is through sexual intercourse with someone who is infected.

People who use intravenous drugs and share needles are at high risk for AIDS/HIV transmission. Many children who are born with AIDS /HIV were infected by a mother who is an intravenous drug user or a sexual partner of a person who is.

The virus has been found in small quantities in tears and sa 'a, however, all documented cases have been traced to blood, semen or vaginal fluid ransmission.

In Iowa, a very small number of persons with AIDS/HIV are under the age of 19. (4 of 132 - 1/1/89).

The two most common ways AIDS/HIV is transmitted to children is through blood transfusions (before routine testing began in 1985) and transmission from an infected mother to her baby.

Good health habits are an important part of AIDS/HIV preventative education, because not everyone who is exposed contracts the virus. Those with healthy bodies and immune systems are expected to be at less risk.



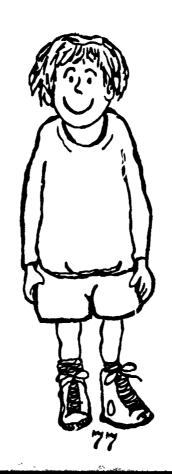
Simple bleach and other cleaning solutions will kill the AIDS virus present in body spills. Children need to be taught that adults who are trained should be asked to clean hydy spills. They can help each other by reporting a friend needs that help, but it is a good health habit to not touch someone else's body spills.



WORDS: ELAIN EDGE

Music: Nadine CHelesvig





(circle correct answer) I used this poster for a: single less	son or unit.
I chose to use learner outcomes #_	·
Those learner outcomes were:	realistic. reachable for my group. did not meet the needs of my group.

uncomfortable for me to use.

Evaluation for Poster #_

I chose to use activities #______.

Those activities: helped reach the objectives.

were successful in my group.

were too much work.

bombed.

Please list creative ways you used this poster.

At the end of the entire unit, please mail to Elain Edge - AIDS Consultant, Department of Education, Grimes State Office Building, Des Moines, Iowa 50319-0146.





AIDS/HIV Education

Bureau of Instruction and Curriculum Iowa Department of Education

Bibliography

Iowa, a place to grow



Bibliography

This is a list of AIDS/HIV Education Advisory Committee reviewed, approved materials to be used in AIDS/HIV education. This group of materials is being distributed to participating Area Education Agencies for use by area teachers and interested staff.

There will be an ongoing periodic update to this bibliography as the program evolves.



Title : A Letter From Brian

Author

Publisher : Amer Red Cross Video Network

Date

Audience : Students Grade Level: 9-14 Language : English

Media : vcr tape

Reviewed : yes Approved : yes

Rejected

Purchased: 1-9-89

Received: Distributed:

Comment 1 : Speaks to feelings as well as facts

Comment 2 : Realistic situations
Comment 3 : Answers questions well

Comment 4

Title : AIDS and Society

Author

Publisher : Glencoe Publishing Co.

Date : 1989
Audience : student
Grade Level: 7-12
Language : English
Media : print
Reviewed : yes
Approved : yes

Rejected

Purchased: 1-9-89 Received: yes

Distributed:

Comment 1 : Attractive Format
Comment 2 : Reasonable Cost
Comment 3 : Factual information

Comment 4 :

Title : AIDS and Society

Author

Publisher : Glencoe Publishing Co.

Date : 1989
Audience : teacher
Grade Level: 7-12
Language : English
Media : print
Reviewed : yes
Approved : yes

Rejected:

Purchased : 1-9-89 Received : yes

Distributed:

Comment 1 : Attractive format
Comment 2 : Reasonable cost
Comment 3 : Factual information
Comment 4 :

Title : AIDS and Your World

Author : Oatman

Publisher : Scholastic- Inc.

Date : 1988

Audience : Teachers and Students

Grade Level: 8-12 Language : English Media : Print Reviewed : yes Approved : yes

Rejected

Purchased: 1-9-89

Received : Distributed:

Comment 1 : Both teacher manual and student paperback teComment xt

Comment 2 : Speaks to global concerns

Comment 3 : Attractive format Comment 4 : Reasonable cost

Title : AIDS Challeng--Prevention Education for Young People

Author : Quackenbusch- Nelson- Clark

Publisher : Network Pub/ETR Assoc

Date : 1988

Audience : Adults and students

Grade Level: 9-Professional

Language : English
Media : print
Reviewed : yes
Approved : yes

Rejected

Purchased: 1-9-89 Received: yes

Distributed:

Comment 1: Short articles by distinguished authors

Comment 2 : Reasearch for student projects
Comment 3 : Guidelines for creating programs
Comment 4 : Easy to use comprehensive reference

Title : AIDS FACTS- Fall 88

Author : magazine

Publisher : Classroom Connections

Date : 1988

Audience : Students and teachers

Grade Level: 7-Adult
Language : English
Media : print
Reviewed : yes
Approved : yes

Rejected

Purchased: 1-9-89

Received : Distributed:

Comment 1 : Attractive format Comment 2 : Reasonable cost

Comment 3 : Comprehensive informations Comment 4 : Medically accurate



Title : AIDS !et's Talk

Author

Publisher : New Dimension Media

Date : 1988 Audience : Students

Grade Level: 3.6 Language : English

Media : vcr tape 15 min

Reviewed : yes
Approved : yes

Rejected

Purchased: 3-1-89

Recoived : Distributed:

Comment: Uses young narrators and puppets with humor Comment 2. Does not talk about seComment xual intercourse

Comment 3 : Follows CDC recommended concepts

Comment 4 : EComment xpensive

Title : AIDS Taking Action

Author

Publisher . New Dimension Media

Date : 1987 Audie ce : Students Grade Level: 6-9

Grade Level: 6-9 Language : English

Media : vcr tape 22 min

Reviewed : yes Approved : yes

Rejected

Purchased: 3-1-89

Received : Distributed:

Comment 1 : Suggestions for action activities

Comment 2 : Gold Apple award winner

Comment 3 : Student narrated Comment 4 : EComment xpensive

Title : AIDS What We Need to Know Level ?

Author : Bartel- Orland- Bartel

Publisher : Pro-ED Fublishing

Date : 1988

Audience : Students- t ochers & parents

Grade Level: 7-9 Language : English

Media . print (manual- workbook- booklet)

Reviewed : yes Approved : yes

Rejact**e**d

Purchased: 1-9-89

Received: Distribused:

Comment 1 : Teaching plans- resource material & activities

Comment 2 . EComment xtensive glossary included

Comment : Consumable workbook

Comment 4 : Recommended for resource rather than complete program

: AIDS What We Need to Know Level II Title

Author : Bartel- Orland- Bartel

Publisher : Pro-ED Publishing

Date : 1988

Audience : Students- teachers & parents

Grade Level: 10-12 Language : English

Media : print (manual - workbook booklet)

Reviewed : yes Approved : yes

Rejected

Purchased: 1.9-89

Received

Distributed:

Comment 1 : Teaching plans- resource material & activities

Comment 2 EComment xtensive glossary included

Comment 3 : Consumable workbook

Comment 4 : Recommended for resource rather than complete program

Title : AIDS-A Primer for Children

Author : Kach

Publisher : Berrent Publications-

Date : 1988 Audience : Student Grade Level: 3-6 Language : English : Print Media : yes Reviewed Approved : yes

Rejected

Purchased: 1-9-89

Received Distributed:

Comment 1 : Short format

Comment 2 : Factual information

Comment 3 : Easy to read

Comment 4 : May have too many concepts for small children

Title : I d the Band Played On

: Shilts

Publisher: Network Publications/ETR Asso

Date : 1988

: Teachers and Community Audience

Grade Level: Professional

Language : English Media : Print Reviewed : yes Approved : yes

Rejected

Purchased: 1-9-89 Received : yes

Distributed:

Comment 1 : Political and medical histo , of HIV/AIDS Comment 2 : EComment xplicit language and situations

Comment 3 : Best seller list

: Preview before using with students Comment 4



Title : Does AIDS Hurt? Author : Quackenbush and Villarreal Publisher : Network Publications/ETR Asso Date : 1988 Audience : Teachers/parents-k-4 Grade Level: Adult : English Language Media Print Reviewed : yes Approved : yes Rejected Purchased : 1-9-89 Received : yes Distributed: Comment 1 : Answers questions asked by children : Hints for speaking honestly and simply Comment 2 Comment 3 : Complete background information on AIDS/HIV Comment 4 : Focutes on prevention of illnesses Title : Don't Forget Sherrie Author Publisher : Amer Red Cross Video Network Date Aud ence : Students & out of school youth Grade Level: 6-14 Language : English Media : vcr tape Reviewed : yes Approved : yes Rejected Purchased : 1-9-89 Received Distributed: Comment 1 : Speaks to high risk behaviours/drug use Comment 2 : Urban setting Comment 3 : Multicultural/hispanic/black Comment 4 Title : Friends for Life Author : wilson and Gregg Publisher : Twenty-first Century Books Date : 1988 Audience : Students Grade Level: 3-7 Language : English Media : Print Reviewed : yes Approved yes 83 Rejected Purchased 1-9-89 Received Distributed: Comment 1 : EComment xcellent resource for elementary library Comment 2 : Written in narrative style

: Deals with feelings as well as facts

ERIC

*Full Teast Provided by ERIC

Comment 3
Comment 4

Title I Have AIDS- A Teenager's Story Author Publisher : Children's Television Wkshp Date : 1988 Audience : Studentsteachers & community Grade Level: 4-Adult Language : English Media : vcr tare 22 min 52 sec Reviewed Approved yes Rejected Purchased : 1-9-89 Received Distributed: Comment 1 : Inclusiverespectful- clear & precise Comment 2 : Very well received in training Comment 3 : Speaks to feelings as well as facts Comment 4 : Presents challenge to communities Title : Into Adolescense- Learning about AIDS : Post and McPherson Author Publisher : Network Publications/ETR Asso Date : 1988 : Students and Teachers Audience Grade Level: 4-8 Language : English Media : Print Reviewed : yes Approved : yes Rejected Purchased 1-9-89 Received : yes Distributed: : Fourteen lesson module Comment 1 Comment 2 : Activities stress critical thinking : Inventory of student knowledge Comment 3 Comment 4 : Deals with feeling and facts Title : Know About AIDS Author : Hyde-Forgyth Publisher : Network Publications/ETR Asso Date 1987 Audience : Student Grade Level: 3-6 Language : English Media : Print Reviewed : yes Approved yes 83 Rejected Purchase. 1-9-89 Received Distributed: Comment 1 : Stories of different eComment xamples people with AIDS Comment 2 : Resource for libraries

: Attractive format with illustrations

Comment 3

Comment 4

Title : Lynda Madaras Talks to Teens About AIDS

Author : Madaras

Publisher : Network Publications/ETR Asso

: 1988 Audience : Students Grade Level: 7/8-12 Language : English : Print Media Reviewed : yes Approved . yes

Rejected

Purchased: 1-9-09

Received Distributed:

Comment 1 : Comprehensive information

Comment 2 : Preface for parents and teachers

Comment 3: Includes abstinence and safer seComment x

Comment 4 : Well known author on puberty issues

litle : Parent-Teen AIDS Education Project Talking with Teens

Author : Peyton

Publisher : San Francisco AIDS Foundation

Date : 1988

Audience : parents and students

Grade Level: 9-Adult

Language : English also available in Spanish Media : print and vcr tape 27 min 20 sec

Reviewed : yes Approved : yes Rejected

Purchased: 1-9-89 Received : yes

Distributed:

Comment 1 : Most useful in PTA format

Comment 2 : Complete program- vcr and print Comment 3 : Has plans for parent teen forum

Comment 4

Title : Teens and AIDS-Playing it Safe

Author

Publisher : Amer Council of Life Insurance

Date : 1987 : students Audience Grade Level: 9-12 Language : English

Media : print/phamplet

Reviewed : yes Approved : yes

Rejected

Purchased : 1-9-89

Received Distributed:

Comment 1 : Attractive format

Comment 2 : Low cost- possible to provide individual copies

87

Comment 3 : Condensed information

Comment 4



Title : Terry and Friends Present AIDS Education Author Publisher : Creative Graphics Date : 1988 Audience : Students and teacher Grade Level: K-3 Language : English : Print Media Reviewed : yes Approved : yes Rejected Purchased: 1-9-89 Received : yes Distributed: Comment 1 : Teacher's guide with student recivity Comment 2 : Appealing activities for young children Comment 3 : Agreement allows activity (local district) duplication Comment 4 : EComment xpensive without duplication rights Title : Terry and Friends Present AIDS Education Author Publisher : Creative Graphics Date : 1988 : Students and teacher Audience Grade Level: 4-6 Language : English Media : Print Reviewed : yes Approved : yes Rejected Purchased: 1-9-89 Received : yes Distributed: Comment 1 : Teacher's guide with student activity Comment 2 : Appealing activities for young children Comment 3 : Agreement allows activity \local district\ duplication Comment 4 : EComment xpensive without duplication rights Title : Understanding AIDS- What Teens Need to Know Author : Kuhns- Editor : Sunburst Communications-Putlisher Inc : 1988 Date Audience : Studente Grade Level: 7-12 Language : English Media : vcr tape 19 min Reviewed : yes Approved yes Rejected Purchased: 1-9-89 83 Received Distributed: Comment 1 : EComment xcellent teaching aid

Comment 2 : Realistic

Comment 4

Comment 3 : Good scientific information

: Includes teachers guide

(A)

Author Title : What is AIDS?

: MT I Film and Video

Publisher: 1988 Date : Students

Audience : 4-7 Grade Level: English Language : vcr tape

Media : yes Reviewed : yes Approved

Rejected

Purchased: 1-9-89

Received Distributed:

Comment 1 : Factual information

Comment 2 : Uses analogy of ballteam and immune system

Comment 3 : Shows parent/child communications

Comment 4:



AIDS/HIV Education

Bureau of Instruction and Curriculum Iowa Department of Education

Appendix

Iowa, a place to grow



AM ACT

RELATING TO TESTING FOR AND CONFIDENTIALITY OF HUMAN INHUNODE-FICIENCY VIRUE-VELATED MATTERS AND PROVIDING PENALTIES.

DE 19 EMACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IONA:

Section 1. MEN SECTION. 1351.1 DEFINITIONS.

As used in this chapter, unless the ontext otherwise requires:

- "AIDS" means acquired immune deficiency syndrome as defined by the centers for disease control of the United States department of health and human services.
- 2. "ARC" means an AIDS-related complex as defined by the centers for disease control of the United States department of health and human services.
- 3. "Department" means the Iowa department of public health.
- 4. "Moalth care provider" means a person providing health care services of any kind.
- 5. "Bealth facility" means a hospital, health care facility, climic, blood bank, blood center, sperm bank, laboratory organ transplant centers and procurement agencies, or other health care institution.
- 6. "NIV" means the human immunodeficienc" virus identified as the causative agent of $\mbox{\em TDS}$.
- 7. "HIV-related test" means a test for the antibody or astigen to HIV .
- 8. "Legal guardian" means a per"on appointed by a court pursuant to chapter 633. In the case of a minor, "legal guardian" also means a parent or other person responsible for the care of the minor.
- 9. "Release of test results" means a written authorization for disclosure of HIV-related test results which is signed and

dated, and which specifies to whom disclosure is authorized and the time period during which the release is to be effective.

Sec. 2. NEW SECTION. 1351.2 TESTING.

- 1. Prior to withdrawing blood for the purpose of pe.forming an HIV-related test, the subject of the test or the subject's legal guardian, except when the provisions of section 135I.2, subsection 6, apply, shall be provided with preliminary counseling which shall include but is not limited to the following:
- a. An explanation of the test, including the test's purposes, potential uses, limitations, and the meaning of both positive and negative results.
- b. An explanation of the nature of AIDS and ARC, including the relationship between the test results and the diseases.
- c. An explanation of the procedures to be fullowed, including the fact that the test is entirely voluntary and can be performed anonymously if requested.
- d. Information concerning behavioral patterns known to expose a person to the possibility of contracting AIDS and methods for minimizing the risk of exposure.
- 2. A person seeking an HIV-related test shall have the right to remain anonymous. A health care provider shall provide for the anonymous administration of the test at the subject's request or shall confidentially refer the subject to a site which provides anonymous testing.
- 3. At any time that a subject is informed of test results, counseling concerning the emotional and physical health effects shall be initiated. Particular attention shall be given to explaining the need for the precautions necessary to avoid transmitting the virus. The subject shall be given information concerning additional counseling. Any additional testing that is advisable shall be explained to the subject and arrangements for the testing shall be made.

- 4. Prior to withdrawing blood for the purpose of performing an MIV-related test, the subject shall be given written notice of the Provisions of this section.
- 5. Not instanding subsections 1 through 4, the provisions of this section do not apply to any of the following:
- a. The performance by a health care provider or health facility of an HIV-related test when the health care provider or health facility procures, processes, distributes, or uses a summar hody part donated for a purpose specified under the Uniform Anatomical Gift Act, or semen provided prior to July 1, 1988, for the purpose of artificial insemination, or donations of blood, and such test is necessary to assure medical acceptability of such gift or semen for the purposes intended.

- b. The performance of an HIV-related test by licensed medical personnel in medical emergencies when the subject of the test is unable to grant or withhold consent, and the test results are necessary for medical diagnostic purposes to provide appropriate emergency care or treatment, except that posttrat counseling shall be required.
- c. A person engaged in the business of insurance who is subject to section 505.16.
- 6. A person may apply for voluntary treatment, contraceptive services, or screening or treatment for AIDS and other sexually transmitted diseases, directly to a licensed physician and surgeon, an osteopathic physician and surgeon, or a family planning clinic. Motwithstanding any other provision of law, if the person seeking the treatment is a minor who has personally made application for services, screening, or treatment, the fact that the minor sought services or is receiving services, screening, or treatment shall not be reported or disclosed, except for statistical purposes. Motwithstanding any other provision of law, however, the minor shall be informed prior to testing that upon confirmation according to prevailing medical technology

of a positive test result the minor's legal guardian is required to be informed by the testing facility. Testing facilities where minors are tested shall have available a program to assist minors and legal guardians with the notification process whice emphasizes the need for family support and assists in making available the resources necessary to accomplish that goal. However, a lesting facility which is precluded by federal statute, regulation, or center for disease control guidelines, from informing the legal guardian is exempt from the notification requirement, but not from the requirement for an assistance program. The minor shall give written consent to these proce'ures and to receive the services, scraening, or treatment. Such consent is not subject to later disaffirmance by reason of minority.

- Sec. 3. MEM SECTION. 1351.3 CONFIDENTIALITY OF RECORDS.
- 1. A person possessing information regulated by this chapter shall not disclose the identity of any other person upon whom an HIV-related test is performed or the results of such a test in a manner which would permit identification of another person and a person shall not be compelled to disclose the identity of any person upon whom an HIV-related test is performed, or the results of the test in a manner which permits identification of the subject of the test, except to any of the following persons:
- a. The subject of the test or the subject's legal guardian subject to the provisions of section 1351.2, subsection 6, when applicable.
- b. Any person who secures a written release of test results executed by the subject of the test or the subject's legal guardian.
- c. An authorized agent or employee of a health facility or health care provider if the health facility or health care provider ordered or participated in the testing or is otherwise authorized to obtain the test results, the agent or employee provides patient care or handles or processes

- d. Licensed medical personnel providing care to the subject of the test, when knowledge of the test results is necessary to provide care or treatment.
- e. The department in accordance with reporting requirements for an MIV-related condition.

- f. A health facility or health care provider which procures, processes, distributes, or uses a human body part from a deceased pe.son with respect to medical information regarding that person, or semen provided prior to July 1, 1988, for the purpose of artificial insemination.
- g. & person allowed access to a record by a court order which is issued in compliance with the following provisions:
- (1) There is a court finding that the person seeking the test results has demonstrated a compelling net. for the test results which cannot be accumudated by other means. In assessing compelling need, the court shall weigh the need for disclosure against the privacy interest of the test subject and the public interest which may be disserved by disclosure due to its deterrant effect on future testing or due to its effect in leading to discrimination.
- (2) Pleadings pertaining to disclosure of test results shall substitute a pseudonym for the true name of the subject of the test. The disclosure to the parties of the subject's true name shall be communicated confidentially, in documents not filed with the court.
- (3) Before granting an order, the court shall provide the person whose test results are in question with notice and a reasonable opportunity to participate in the proceedings if the person is not already a party.
- (4) Court proceedings as to disclosure of test results shall be conducted in camera unless the subject of the test agrees to a hearing in open court or unless the court determines that a public hearing is necessary to the public interest and the proper administration of justice.

- (5) Upon the issuance of an order to disclose test results, the court shall impose appropriate safeguards against unauthorized disclosure, which shall specify the persons who may gain access to the information, the purposes for which the information shall be used, and appropriate prohibitions on future disclosure.
- h. An employer, if the test is authorized to be required under any other provision of law.
- 2. A person to whom the results of an HIV-related test have been disclosed pursuant to subsection 1 shall not disclose the test results to another person except as authorized by subsection 1, or by a court order issued pursuant to subsection 1.
- 3. If disclosure is made pursuant to this section, the disclosure shall be accompanied by a statement in writing which includes the following or substantially similar language: "This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorisation for the release of medical or other information is not sufficient for this purpose." An oral disclosure shall be accompanied or followed by suc'. a notice within ten days.
 - Sec. 4. NEW SECTION. 1351.4 REMEDIES AND PENALTIES.
- 1. A person who violates a provision of section 1351.2 or 1351.3, is subject to a civil penalty not to exceed one thousand dollars for each violation. Civil penalties collected pursuant to this subsection shall be forwarded to the treasurer of the state for deposit in the general fund of the state.
- 2. A person aggric od by a violation of this chapter shall have a right of action for damages in district court.

- 3. An action under this chapter is barred unless the action is commenced within two years after the cause of action accrues.
- 4. The attorney general may maintain a civil action to enforce this chapter.
- 5. This chapter does not limit the ights of the subject of an ETV-related test to recover damages or other relief under any other applicable law.
- 6. This chapter shall not be construed to impose civil liability or criminal sanction for disclosure of HIV-related test results in accordance with any reporting requirement for a diagnosed case of AIDS or a related condition by the department or the centers for disease control of the United States public health service.
 - Sec. 5. MEN SECTION. 1351.5 TLES ADOPTED.

The department shall adopt rules pursuant to chapter 17A to implement and enforce this chapter. The rules may include procedures for taking appropriate action with regard to health facilities or health care providers which violate this chapter or the rules adopted pursuant to this chapter.

The department shall adopt rules pursuant to chapter 17A which require that if a health care provider attending a person prior to the person's death determines that the person suffered from or was suspected of suffering from a contagious or infectious disease, the health care provider shall place with the remains written notification of the condition for the information of any person handling the body of the deceased person subsequent to the person's death.

The department, in cooperation with the department of public safety, and persons who represent those who attend dead bodies shall establish for all emergency medical providers including paramedics, ambulance personnel, physicians, nurses, hospital personnel, first responders, peace officers, or firefighters, who provide emergency care services to a person, and shall establish for all persons who attend dead bodies,

protocol, and procedures for the use of universal precautions to prevent the transmission of contagious and infectious diseases.

Sec. 6. <u>NEW SECTION</u>. 246.515 HUMAN IMMUNODEPICIENCY VIRUS-RELATED MATTERS -- EXEMPTION.

The provision of chapters 135H and 135I relating to knowledge and consent do not apply to persons committed to the custody of the department. The department may provide for medically acceptable procedures to inform employees, visitors, and persons committed to the department of possible infection and to protect them from possible infection.

- Sec. 7. <u>NEW SECTION</u>. 505.16 APPLICATIONS FOR INSURANCE TEST RESTRICTIONS -- DUTIES OF COMMISSIONER.
- 1. A person engaged in the business of insurance shall not require a test of an individual in connection with an application for insurance for the presence of an antibody to the human immunodeficiency virus unless the individual provides a written release on a form approved by the insurance commissioner. The form shall include information regarding the purpose, content, use, and meaning of the test, disclosure of test results including information explaining the effect of releasing the information to a person engaged in the business of insurance, the purpose of which the test results may be used, and other information approved by the insurance commissioner. The form shall also authorize the person performing the test to provide the results of the test to the insurance company subject to rules of confidentiality, consistent with section 1351.3, approved by the insurance commissioner. As used in this section, "a person engaged in the business of insurance" includes hospital service corporations organized under chapter 514 and health maintenance organizations subject to chapter 514B.
- 2. The insurance commissioner shall approve rules for carrying out this section including rules relating to the proparation of information to be provided before and after a

test and the protection of confidentiality of personal and medical records of insurance applicants and policyholders.

Sec. 8. The Code editor shall, as appropriate, codify the provisions of this Act, with the exception of section 7 of this Act, and Senate File 2157 and other propriate Acts approved by the general assembly into one chapter relating to accounted immune deficiency syndrome and shall provide appropriate divisions within that chapter.

Sec. 9. Section 135C.23, subsection 2, Code Supplement 1987, is amended to read as follows:

- 2. A health care facility shall not knowingly admit or retain a resident:
 - a. Who is dangerous to the resident or other residents.
- b. Who is in an acute stage of alcoholism, drug addiction, or mental illness,—or-an-active-state-of-communicable-disease.
- c. Whose condition or conduct is such that the resident would be unduly disturbing to other residents.
- d. Who is in need of medical procedures, as determined by a physician, or services which cannot be or are not being carried cut in the facility.

This section does not prohibit the admission of a patient with a history of dangerous or disturbing behavior to an intermediate care facility, skilled nursing facility, or county care facility when the intermediate care facility, skilled nursing facility, or county care facility has a program which has received prior approval from the department to properly care for and manage the patient. An intermediate care facility, skilled nursing facility, or county care facility is required to transfer or discharge a resident with dangerous or disturbing behavior when the intermediate care facility, skilled nursing facility, or county care facility cannot control the resident's dangerous or disturbing behavior. The department, in coordination with the state mental health and mental retardation commission, shall adopt rules pursuant to chapter 17A for programs to be required in

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intermediate care facilities, skilled nursing facilities, and county care facilities that admit patients or have residents with histories of dangerous or disturbing behavior.

The denial of admission of a person to a health care facility shall not be based upon the patient s condition, which is the existence of a specific disease in the patient, but the decision to accept or deny admission of a patient with a specific disease shall be based solely upon the ability of the health care facility to provide the level of care required by the patient.

DONALD	D. AVENSON
Speake	r of the House

I hereby certify that this bill originated in the House and is known as House Pile 2294, Seventy-second General Assembly.

	JOSEPH O'HERN
	Chief Clerk of the House
Approved	_, 1988
	_

TERRY E. BRANSTAD

HF 2294

SENATE PILE 2094

AN ACT

RELATING TO INSTRUCTIONAL REQUIREMENTS FOR HUMAN GROWTH AND LEVELOPMENT IN GRADES KINDERGARTEN THROUGH TWELVE AND PROVIDING AN EFFECTIVE DATE.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. Section 256.11, subsections 2, 3, and 4, Code Supplement 1987, are amended to read as follows:

- 2. The kindergarten program shall include experiences designed to develop healthy emotional and social habits and growth in the language arts and communication skills, as well as a capacity for the completion of individual tasks, and protection and development of physical well-being with attention given to experiences relating to the development of life skills and human growth and development. A kindergarten teacher shall hold a certificate providing that the holder is qualified to teach in kindergarten. An accredited nonpublic school must meet the requirements of this subsection only if the nonpublic school offers a kindergarten program.
- 3. The following areas shall be taught in the grades one through six: English-language arts, including reading, handwriting, spelling, oral and written English, and literature, social studies, including geography, history of the United States and Iowa, cultures of other peoples and nations, and American citisenship, including the study of mational, state, and local government in the United States; mathematics; science, including environmental awareness and

conservation of natural resources; health and physical education, including the effects of alcohol, tobacco, drugs, and poisons on the human body, human sexuality, self-esteem, stress management, and interpersonal relationships; the characteristics of communicable diseases, including acquired immune deficiency syndrome; traffic safety, including pedestrian and bicycle safety procedures; music; and art.

- 4. The following shall be taught in grades seven and eight as a minimum program: science, including environmental awareness and conservation of natural resources; mathematics; social studies; cultures of other peoples and nations, and American citizenship; English-language arcs which shall include reading, spelling, grammar, oral and written composition, and may include other communication subjects; health and physical education, including the effects of alcohol, tobacco, drugs, and poisons on the human body, the characteristics of communicable diseases; including venereal sexually transmitted diseases and acquired immune deficiency syndrome, current crucial health issues, human sexuality, self-esteem, stress management, and interpersonal relationships; music; and art.
- Sec. 2. Section 256.11, subsection 6, paragraph j, Code Supplement 1987, is amended to read as follows:
- j. Health education, including an awareness of physical and mental health needs, the effects of alcohol, tobacco, drugs, and poisons on the human body, the characteristics of communicable diseases, including veneral sexually transmitted diseases and acquired immune deficiency syndrome, and current crucial health issues, human sexuality, self-esteem, stress management, and interpersonal relationships.
- Sec. 3. <u>NEW SECTION</u>. 279.50 HUMAN GROWTH AND DEVELOPMENT INSTRUCTION.

- 1. Each board of directors of a public school district shall appoint a resource committee composed of representatives of the following groups: parents, teachers, school administrators, pupils, health care professionals, members of the clergy, members of the business community, and other residests of the school district deemed appropriate. The resource consittee shall study the provision of instruction to pupils is grades kindergarten through twelve appropriate to the pupils' grade level, age, and level of saturity, in topics related to human growth and development in order to promote accurate and comprehensive knowledge in this area, to foster responsible decision making, based on cause and effect, and to support and enhance the efforts of parents to provide moral guidance to their children. The resource committee shall address and make recommendations to the board concerning the school district's curriculum on each of the following topics of instruction:
- a. Self-esteem, responsible decision making, and personal responsibility and goal setting.
 - b. Interpersonal relationships.
- c. Discouragement of premarital adolescent sexual activity.
 - d. Pamily life and parenting skills.
- e. Human sexuality, reproduction, contraception and family planning, prenatal development including awareness of mental retardation and its prevention, childbirth, adoption, available prenatal and postnatal support, and male and female responsibility.
 - f. Sex stereotypes,
 - 9. Behaviors to prevent sexual abuse or sexual harassment.
- h. Sexually transmitted diseases, including acquired immune deficiency syndrome, and their causes and prevention.
 - i. Substance abuse treatment and prevention.

- j. Suicide prevention.
- k. Stress management.
- 2. The resource committee shall make its recommendations regarding the implementation of human growth and development instruction for the school district, including the instructional topics specified in subsection 1, paragraphs "a" through "k", to the school board at least every three years and shall provide written notification to the state department of education.
- 3. The school board may designate the advisory committee appointed pursuant to section 280.12, subsection 2, as the resource committee to perform the duties required by this section, provided the advisory committee appointed under section 280.12, subsection 2 meets the resource committee composition requirements in subsection 1 of this section.
- 4. Each school board shall provide instruction in kindergarten which gives attention to experiences relating to life skills and human growth and development as required in section 256.11.

Each school board shall provide instruction in human growth and development including instruction regarding human sexuality, self-esteem, stress management, interpersonal relationships, and acquired immune deficiency syndrome as required in section 256.11, in grades one through twelve. Each school board shall annually provide to a parent or guardian of any pupil enrolled in the school district, information about the human growth and development curriculum used in the pupil's grade level and the procedure for inspecting the instructional materials prior to their use in the classroom. A pupil shall not be required to take instruction in human growth and development if the pupil's parent or guardian files with the appropriate principal a written request that the pupil be excused from the

instruction. Notification that the written request may be made shall be included in the information provided by the school district.

Each school board or merged area school which offers general adult education classes or courses shall periodically offer an instructional program in parenting skills and in human growth and development for parents, guardians, prospective biological and adoptive parents, and foster parents.

- 5. The state department of education shall make available model human growth and development curricula for grades tindergarten through twelve which shall include the instructional topics specified in subsection 1, paragraphs "a" through "k". The department of education shall distribute the model curricula to each school board, to the authorities in charge of each accredited mospublic school, and to each resource committee appointed pursuant to subsection 1, and shall provide technical assistance to school boards and resource committees in the use or adaptation of the curricula.
- 6. Each area education agency shall periodically offer a staff development program for teachers who provide instruction in human growth and development.
- 7. The department of education shall identify and disseminate information about early intervention programs for students who are at the greatest risk of suffering from the problems of dropping out of school, substance abuse, adolescent presnancy, or suicide.
- Ser.: 4. HUMAN GROWTH AND DEVELOPMENT. Rules adopted by the state board under section 256.17 which prescribe standards for accredited schools shall include human sexuality, selfesteem, stress management, interpersonal relationships, the characterietics of acquired immune deficiency syndrome, and give attention to experiences relating to the development of life skills and human growth and development.

	Act takes effect July 1, 1992.
	JO ANN ZINKERMAN President of the Senete
	DONALD D. AVERSON Speaker of the House
	bill originated in the Senate a Seventy-second General Assembly
	JOHN P. DWYER
Approved, 198	Secretary of the Senate

F 2094

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AN ACT

RELATING TO A COMPREHENSIVE ACQUIRED IMMUNE DEFICIENCY SYN-DROME (AIDS) PREVENTION AND INTERVENTION PLAN.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IONA:

Section 1. ACQUIRED INNUME DEFICIENCY SYNDROME-RELATED COMPTIONS -- FINDINGS.

The general assembly finds and declares that acquired immade deficiency syndrome (AIDS)-related conditions present a significant challenge to the nation and to this state. The mation and this state are presented with the challenge of compensating society for the loss of many young, productive citisens. The state is also challenged with protecting the public health while maintaining individual liberties.

Towars will experience the impact of AIDS-related conditions for some time and expect the establishment of a preactive, effective policy based upon reason and medical evidence, not a reactive, ineffective policy based upon fear and prejudice.

An effective, comprehensive policy includes many elements. The general assembly finds and declares that the state comprehensive plan for the prevention of and intervention in AIDS-related conditions includes the following elements: public and professional health education; testing and counseling including contact counseling; and the increased availability of public information. Other elements, including

protection of individual rights, confidentiality, and provision of care, are parts of a comprehensive approach to prevention of and intervention in AIDS-related conditions.

Sec. 2. NEW SECTION, 135H.1 LEAD AGENCY.

The Iowa department of public health is designated as the lead agency in the coordination and implementation of the state comprehensive acquired immune deficiency syndrome (AIDS)-related conditions prevention and intervention plan. As used in this chapter, "acquired immune deficiency syndromerelated conditions" or "AIDS-related conditions" means human immunodeficiency virus, acquired immune deficiency syndrome, acquired immune deficiency syndrome, acquired immune deficiency syndrome-related complex, or any other condition resulting from the human immunodeficiency virus infection.

- Sec. 3. <u>MEM SECTION</u>. 135H.2 COMPREHENSIVE ACQUIRED IMMUNE DEFICIENCY SYNDROHE (AIDS)-RELATED CONDITIONS PREVENTION AND INTERVENTION PLAN.
- 1. The Iowa department of public health shall implement the various components of the comprehensive AIDS prevention and intervention plan in accordance with the following prioritized schedule:
 - a. Public and professional health education.
 - b. Testing and counseling.
 - c. Contact counseling.
 - d. Public information.
- 2. All federal and state moneys appropriated to the Iowa department of public health for AIDS-related activities shall be allocated in accordance with the prioritized schedule, and grants shall be awarded to the maximum extent feasible to community-based organizations.
- Sec. 4. <u>NEW SECTION</u>. 135H.3 PUBLIC AND PROFESSIONAL EDUCATION.
- 1. The Iowa department of public health shall, in cooperation with the department of education and other agencies, organizations, coalitions, and local health departments.

- divelop and implement a program of public and professional
- 2. The program of public and professional AIDS-related
 - a. Pertinent AID -related conditions information directed toward individuals who are at risk for an AIDS-related modition.
 - The Pertinent AIDS-related conditions information directed to the state of the stat
 - . Firtificat AIDS-related conditions information directed bound the gameral public.
 - Sec. 5. May 87 7100. 1358.4 TRETING AND COUNSELING. 'Sneting and counseling shall be offered to the following:
 - . 1. All persons seeking treatment for a sexually transmitted disease.
 - 7. All persons seeking treatment for intravenous drug Lambo or having a history of intravenous drug abuse.
 - All-persons who consider .nonselves at risk for the human immagasficiency virus infection.
 - 4. Male and female prostitutes.

Count of ing and testing shall be provided at alternative testing and econsoling sites and at sexually transmitted disagre clinics. The Ious department of public health shall assist lessi beards of health in the development of programs which provide free analyseus testing to the public.

Sec. 6. WWW SECTION. 135H.5 PUBLIC INFORMATION CAR-PARCING.

The Yeve department of public health shall develop, in congeration with other agencies, organizations, coalitione, and level health departments, through incorporation of the efforts ? print, wire, and air media, public information campais ; to increase the distribution of information to the public. Public information campaign activities shall include the following:

- 1. The conducting of informational campaigns designed to increase the understanding of AIDS-related conditions in all segments of the population to alleviate unfounded fear and anxiety.
- 2. The rtimulation of individual and community actions to develop AIDS public service activities.
- 3. The encouragement of the use of AIDS public service innouncements.
- Sec. 7. MEN SECTION. 135H.6 PARTHER NOTIFICATION PROGRAM HUMAN IMMUNODEPICIENCY VIRUS (HIV).
- 1. The Iowa department of public health shall implement, as a part of the comprehensive AIDS prevention and intervention plan, a partner notification program for persons known to have tested positive for the human immunodeficiency virue infection, beginning September 1, 1988.
- 2. The Iowa department of public health ehall initiate the program at alternative teeting and counseling sites and at sexually transmitted disease clinice.
- 3. In administering the program, the Iowa department of public health shall provide for the following:
- a. A person who tests positive for the human immunodeficiency wirus infection shall receive positive counseling, during which time the person shall be encouraged on a strictly confidential basis to refer for counseling and human immunodeficiency wirus testing any person with whom the person has had sexual relations or has shared intravenous er ipment.
- b. If, following counseling, a person who teste positive for the human immunodeficiency virus infection chooses to disclose the identity of any sexual partners or persons with whom the person has shared intravenous equipment, the physician or health practitioner attending the person is making the disclosure voluntarily.

- person shall forward any written consent forms to the Iowa department of public health.
- 4. Is making contact the lowe department of public health mot disclose the identity of the person who provided the same of the persons to be contacted and shall protect the desired and s
- The loun department of public health may delegate its partmer notification duties under this section to local health matherities unless the local authority refuses or neglects to payment the dontact tracing program in a manner deemed to be affective by the love department of public health.
- A person who violates a confidentiality requirement of madesortion 1, 2, 3, 4, or 5 is guilty of a class "D" felony.
- Sec. 8. NEW SECTION. 135H.7 ACCREDITATION OF HUMAN
- erel: For the purpose of this section unless the context intherwise requires:
- a. "Clinic & laboratory" means a facility for the migrobiological, serological, chemical, hematological, radioblemsay, cytological, immunohematological, pathological or other examination of materials derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of any disease or assessment of a medical condition.
- > b. "Blood bank" means a facility for the collection, processing, or storage of human blood or blood derivatives, or from which or by means of which human blood or blood derivatives are distributed or otherwise made available.
- e. "Laboratory" includes a clinical laboratory and a blood bank.
- 2. Seginning July 1, 1988, human immunodeficiency virus screening and confirmatory testing shall be performed only by laboratories certified on an annual basis pursuant to this section.

- 3. The director of public health shall adopt rules escablishing standards for the accreditation of laboratories to perform human immunodeficiency virus screening and confirmatory testing. The ruler shall include but are not limited to standards relating to proficiency testing, record maintenance, adequate staffing, and confirmatory testing. The rules shall provide for acceptance of accreditation programs which are in conformance with the standards established by the rules.
- 4. The Iowa department of public health shall provide application forms for certification of a laboratory. The director shall prescribe by rule the information to be included on the application form.
- 5. A laboratory shall not be certified unless the laboratory meets all standards established by the Iowa department of public health.
- 6. The Icwa department of public health may conduct periodic inspections of laboratory facilities, methods, procedures, materials, staff, and equipment for compliance with the standards established pursuant to this section. The department may delegate this authority to the state hygienic laboratory.
- 7. A laboratory's certification may be revoked, suspended, or limited, of at any time the laboratory is found to be in violation of any of the standards adopted by the department pursuant to this section.
- Sec. 9. <u>NEW SECTION</u>. 135H.8 ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS)-RELATED CONDITIONS -- SCREENING, TESTING, AND REPORTING.
- 1. Prior to withdrawing blood for the purpose of performing a human immunodeficiency virus-related test, the physician or other practitioner shall inform the subject of the test that the test is voluntary and may be performed anonymously if requested. Within seven days after the testing of a person with a test result indicating human

Emanodeficiency virus infection which has been confirmed as positive according to prevailing medical technology, the impaintan or other practitioner at whose request the test was performed shall make a report to the Iova department of public banks on a form provided by the department. Prior to making the required report, the physician or other practitioner shall provide written information regarding the partner notification program and shall inquire if the person vishes to initiate instinguishing in the program by agreeing to have identicying information reported to the department on a confidential limits.

- 2. Within seven days of diagnosing a person as having an allow-related condition, the diagnosing physician shall make a payork to the love department of public health on a form provided by the department.
- 2. Within seven days of the death of a person resulting from an ARDS-related condition, the attending physician shall make a report to the low department of public health on a form provided by the department.
- the Mithin seven days of the testing of a person with a their regult indicating human immunodeficiency virus infection which has been confirmed as positive according to prevailing modical technology, the director of a blood plasma center or brind been shall make a raper; to the Ious department of mubble health on a form provided by the department.
- S. Mithin seven days of the testing of a person with a best result indicating human immunodeficiency virus infection which has been confirmed as positive according to prevailing medical technology, the director of a clinical laboratory shall make a report to the Iova department of public health metaling the person's name or a confidential form of identification known only to the physician or other health practitioner requesting the test and the name and address of the physician or other health care practitioner requesting the test.

6. The forms provided by the department pursuant to subsections 2 and 3 shall contain the name, date of birth, sex, and address of the subject of the report and the name and address of the physician or other person making the report. The forms provided by the department pursuant to subsections 1, 4, and 5 may include the subject's age, race, marital status, or other information deemed necessary by the department for epidemiological purposes, but shall not include the subject's name or address without the written authorisation of the subject.

The eubject shall be provided with information regarding the confidentiality measures followed by the department and may request that the department maintain the eubject's confidential file for the purposes of partner notification, or for the inclusion of the subject in research or treatment programs.

Sec. 16. <u>MEN SECTION</u>. 135H.9 DUTIES OF PUBLIC ERALTH OFFICIALS.

- 1. State and local health officers shall investigate sources of human immunodeficiency virue infection and shall use every appropriate means to prevent the spread of the disease.
- The Iowa department of public health shall do all of the following:
- a. Provide consultation to agencies and organizations regarding appropriate policies for testing, education, confidentiality, and infection coatrol.
- b. Conduct health information programs for the public relating to human immunodeficiency virus infection, including information about how the infection is transmitted and can be prevented. The department shall prepare, for free distribution, printed information relating to human immunodeficiency virus infection and prevention.
- c. Provide educational programs concerning human immunodeficiency virus infection in the workplace.

- the new log and implement human immunodeficiency virus improvation risk-reduction programs for specific populations at high risk for infection.
- F. In properation with the department of education, Exercise and update a medically correct acquired immune medically syndrome prevention curriculum for use at the distriction of secondary and middle schools.

School districts shall provide every elementary and provide every elementary and provide every elementary and provide every elementary and elementary systems in acquired the prevention.

- Mac. 11. MM SECTION. 1358.10 COMPIDENTIAL REPORTS AND
- in imports, information, and records submitted and printerinal pursuant to this chapter are strictly confidential medical information. The information shall not be released, thereof with an agency or institution, or made public upon stances, search warrant, discovery proceedings, or by any maker manns except under any of the following circumstances:
- information for statistical purposes in a manner such that no individual person can be identified.
- b. Release may be made of medical or epidemiological information to the extent necessary to enforce the provisions of this chapter and related rules concerning the treatment, control, and investigation of human immunodeficiency virus infaction by public health officials.
- c. Release may be made of medical or epidemiological information to medical personnel in a medical emergency to the man. At Mocessary to protect the health or life of the named party.
- 2. An officer or employee of the state or local department of health or a person making a report pursuant to this chapter shall not be examined in any judicial, executive, legislative, or other proceeding as to the existence or content of an individual report made pursuant to this chapter.

- 3. Reports, information, and records which contain the identity of persons except reports, information, and records necessary to honor the requests made pursuant to section 135H.8 shall be destroyed immediately after the extraction of statistical data and completion of contact identification or in no event longer than six months from the date the report, information, or record was received.
- 4. A person making a report in good faith pursuant to this chapter is immune from any liability, civil or criminal, which might otherwise be incurred or imposed as a result of the report.
- 5. For purposes of this section, "good faith" means objectively reasonable, and not in violation of clearly established statutory rights or other rights of a person which a reasonable person would know or should have known.
- Sec. 12. Section 135.11, Code Supplement 1987, is amended by adding the following new subsections:

NEW SUBSECTION. 23. Adopt rules which require personnel c: a licensed hospice, of a homemaker-home health aide provider agency which receives state homemaker-home health aide funds, or of an agency which provides respite care services and receives funds to complete a minimum of two hours of training concerning acquired immune deficiency syndrome-related conditions through a program approved by the department. The rules shall require that new employees complete the training within six months of initial employment and existing employees complete the training on or before January 1, 1989.

NEW SUBSECTION. 23. Adopt rules which require all emergency medical services personnel, firefighters, and law enforcement personnel to complete a minimum of two hours of training concerning acquired immune deficiency syndromerelated conditions and the prevention of human immunodeficiency virus infection.

Sec. 13. WAIVER PROCESS INITIATION.

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The department of human services shall initiate the application process in order to obtain a waiver from the health care financing administration of the United States department of health and human services for the provision of alternative services to persons with acquired immune deficiency syndrome or a related condition.

Sec. 14. Sections 139.41 and 139.42, Code Supplement 1987, are repealed.

JO ANN ZIMMERMAN
President of the Senate

DONALD D. AVENSON
Speaker of the House

I hereby certify that this bill originated in the Senate and is known as Senate File 2157, Seventy-second General Assembly.

JOHN F. DWYFR
Secretary of the Senate

Approved , 1988

TERRY E. BRANSTAD Governor



This is a group of Somebodies.



Somebodies come in different sizes, shapes and colors.

Somebodies are either male or female.

All somebodies are special, because there is no other somebody just like them.



All somebodies feel glad, mad, sad or scared at times.

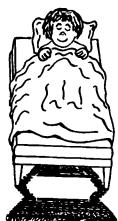
Somebodies feel glad when they are doing what they like and do best.

Somebodies feel mad when things happen to them that they do not like.

Somebodies feel sad when they don't feel well, or when anybody hurts them.

Somebodies feel scared when they don't know what is going to happen.

Somebodies need the right kinds of food . .



and plenty of rest to grow up.



Somebodies need exercise to become strong.

Younger somebodies need older somebodies to help them be safe and healthy.



All somebodies and to be loved.



There are times when somebodies get sick.



If a somebody has the flu or the chicken pox, he or she needs to stay away from others, so others don't get the flu or chicken pox.



If a somebody has AIDS, he or she can be with others without making them sick.

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Most of the time, somebodies can decide what to do with their special bodies.



Other times, things happen that nobody can control.



Then, somebodies need friends and families to love them and help them in special ways.

